

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 OF 111

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Human Rights Campaign Equality Votes PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. David Lowell, Abbe, , ,

Mailing Address 1700 K St NW

City  
Washington

State  
DC

Zip Code  
20006-3817

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Winston and Strawn

Occupation (for Individual)  
Lawyer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 28 / 2019

Transaction ID : VVBMQPZ8FM0

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Day, Julia, , ,

Mailing Address 639 Washington Blvd  
Apt 524

City  
Baltimore

State  
MD

Zip Code  
21230-2210

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self

Occupation (for Individual)  
Community Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 28 / 2019

Transaction ID : VVBMQPZ8330

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Deaton, Tyler, , ,

Mailing Address 1400 14th St NW  
Unit 507

City  
Washington

State  
DC

Zip Code  
20005-4553

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Allegiance Strategies

Occupation (for Individual)  
Fundraiser

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2019

Transaction ID : VVBMQPZ92M0

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

510.00

TOTAL This Period (last page this line number only).....▶